

## MARICOPA COUNTY BOARD OF HEALTH MEETING MINUTES

Monday, July 23, 2012

301 W. Jefferson Street, 10<sup>th</sup> Floor

Phoenix, Arizona 85003

Board of Supervisors Conference Room

Mr. Cassano called the meeting to order at 3:26 pm.

### ROLL CALL:

#### Members Present:

Bryant Boyack, M.D.  
Don Cassano  
Zuhdi Jasser, M.D.  
Shannon Smith  
Brian Spicker  
Colleen Wheeler (via phone)

#### Members Excused:

Andrew Ingram  
Francisca Montoya  
Maricopa County Supervisor Stapley, District 2  
Kip Steill

Ex-Officio: Bob England, M.D.

#### Guests:

Sherry Gillespie, Arizona Restaurant Association  
Dr. Erin Carr-Jordan, Kids Play Safe, Kaplan University  
Tim David, AZ Playground  
Supervisor Fulton Brock

### CALL TO THE PUBLIC:

Don Cassano advised that if anyone from the public is present at the meeting today who would like an opportunity to speak, a Speaker Request Form is available and must be filled out prior to addressing the Board of Health. The Board of Health cannot take action on but only discuss questions from the public under the Call to the Public section.

### Discussion/Action Items

#### 1. Approval of the April 24, 2011 BOH Minutes

Francisca Montoya made the motion to approve the October 24, 2011 Board of Health minutes. Kip Steill seconded the motion. The motion passed unanimously.

#### 2. Fee Waiver Applications

*(see attached document-Summary 07-23-2012 BOH meeting)*

Ms. Jeannie Taylor presented 33 fee waiver applications to the Board of Health. Mr. Spicker made the motion to approve

#### 3. Community Health Assessment

Dr. Bob did a brief introduction of Dr. Eileen Eisen-Cohen who is with the Office of Performance Improvement Public Health. She presented on the Local Public Health System.

The Local Public Health System tells how Public Health is functioning as a public health system. The first slide shows a variety of organizations and companies that represent partners in our communities. Our goal is to work together to REACH optimal health and quality of life for all. The VISION is to have empowered communities. A set of five values that were determined by a diverse group of 60 include collaboration, diversity, health equity, access and education. These five values will help us get to our vision of empowered communities.

In order to go through a community process, the process is in the middle of the circle, the first thing was to do the vision, go through the assessment and proceed to the stage of formulating goals. First assessment of local public health systems asked the question, how are we fulfilling the ten essential services of public health. We have found as a system that we are doing well in (investigating outbreaks, there are also areas of opportunities such as evaluating services and conducting research. Some of the factors gained in this assessment is the idea that there were people and community systems who didn't feel they were a part of the community of health who now know they are and the role they play.

The preparedness system is quite extensive and we have strong networks. We also received recommendations from community partners.

The health status report (2<sup>nd</sup> assessment) looked to our federal partners, they put out lists that show what the risks are to our health community. We looked at these things and did some prioritizing. We brought epidemiologists together and did a panel that had expertise and research and had them help us prioritize the health issues. We ended up with 15 health priorities. Community surveys were done. 429 surveys in four ethnic/racial minority communities, 241 surveys were done with Community Partners/Health Professionals and 303 surveys with the Maricopa County Department of Public Health staff. Recommendations were prioritized based on top three most important issues identified by the community, the conditions that were responsible for the highest number of years of potential life lost, the prevalence and trends over a ten year period from 2001 through 2010 and the existence of health disparities by race/ethnic subgroups. 202 community members participated in several focus groups, such as clean air.

What came out of this mix of four assessments and results were five strategic public health priorities. These priorities include nutrition, physical activity, tobacco use, access to care and obesity/diabetes.

I look forward to sharing a good draft on our improvement health plan in the fall as we start incorporating some of these ideas pulled from these assessments, focus groups, collaborations and discussions.

Shannon Smith asked if there were any surprises in the results shown and are we comparable to other counties. We are very comparable to other large counties. Our findings were the same. Our community survey pointed us to specific health conditions like cardiovascular disease and lung cancer. We are taking a more specific approach than others. Conditions associated with oral health and diseases of the mouth and substance abuse and mental health, A force choice survey.

Accountability care organizations (lots of overlap) – working more with these ACOs with needs assessment data, more care on their in as providers... health conditions that affect populations specifically

Ms. Wheeler asked if there were strong partners at the state? Or if you need other resources that are not in place. Yes, we do. We are working with the bureau of tobacco and chronic disease. We are working with the office of health disparities, a nice strong partnership of about five staff that meet with us regularly. We will let the Board of Health know, however, if we seek additional support.

#### **4. Indoor Playground Ordinance**

Mr. Kolman presented on the ordinance that they are proposing. We would look for places that are primarily serving food that have indoor play areas that are close to where people are serving food. ASTM has a definition of these types of places but I am not sure that is the definition we want to use but we will come up with some definition. We class restaurants out due to risk. We want to focus on businesses that primarily focus on serving food and that also have an indoor playground.

Our ordinance would require that play areas be cleaned at least once a day and as often as necessary. The operator would determine whether it needs to be cleaned more often. Complaint line is optional and we would send an inspection.

Most restaurants have cleaning solutions for surfaces. We propose that they use the same chemical that is used in their restaurants for the play areas (red bucket for tables/blue bucket for slides) Sanitizer solution that is already being used.

We are also requesting that hand sanitizer stations be placed within the vicinity of the play area. Common sense is whatever parents tell them to do it. There is no data. Hand sanitizer stations are now everywhere. If we do have the hand sanitizer stations, the industry will put a sign that says food and drink cannot go into the play structure

We will also look into adopting procedures for special events to deal with those.

Playground inspections would be done as part of the routine inspection (either it is free of spoilage and debris or it isn't and then it would be addressed)

We will use Chapter 1 of the Environmental Health Code that will give us a wide range of tools. We have a full range of tools to use to inspect.

The other thing is that this ordinance is going to go in its own separate chapter of the code.

Don Cassano asked for anyone of the public to speak

Dr. Erin Carr-Jordan introduced herself and said that she was in strong support of what everyone has put together. The kids being a very huge priority.

Mr. Tim David, AZ Playground introduced himself as one of the people who cleans and maintains this type of playground equipment. When you purchase the equipment, they provide guidelines for maintaining and cleaning the equipment. I think we should stay with the ASTM theme. CPSI (certified play safety inspectors). My focus is on the play ground safety. Some of the facilities get a very good beating. My point is that locally we have people that go in there and dig in there to clean them and maintain them.

Supervisor Fulton Brock thanked the board of health and all the people that have come together to make sure that these considerations were looked into. We are hoping that we can make a common sense solution. Dr. Jordan-Carr has presented visually what is potentially hazardous for our kids. We don't want to dictate cleaning materials. We don't want to dictate every hour. We just want a common sense policy. We will concentrate on those retail restaurants that serve food in an inside establishment. We want to be able to get your endorsement to include this in our restaurant package. Finally, many elementary schools, hospitals, libraries, grocery stores have sanitary stations even health clubs, that try to contain the spread of things that might be susceptible. We appreciate your consideration.

The question of how the establishment maintains accountability was asked. Right now it is an honor system and we can only see it as we inspect. We hope that there is regularity and sensitivity to keeping these areas clean.

Sherrie Gillespie with the Arizona Restaurant Association came up to speak. We are fine with the hand sanitizing stations. The only concern is the universe. We continue to have the issue as to why the food retails are being carved out. Anything that is passed is flexible for all of our establishments to fall under these structures. Sherrie Gillespie said that she feels that we have come a long way, working with all the stakeholders and coming to compromises.

The definition, cleaning frequency, type of cleaner use, hand sanitizer station, special events, being part of the normal inspection, the same policy and procedures for enforcement, an effective date would all be

defined once the Board of Supervisors sign it and then we would allow a couple of educational inspections prior to enforcement.

Mr. Kolman and the Environmental Services department would bring all of these to our next board of health meeting to get a ruling to submit to the Board of Supervisors.

5. **Green Pool Assessment Statement of Appeal, Cause Number EF 12-00553**

I am following up on an appeal for a mosquito breeding. The property owner

The county is looking to recoup the cost of \$348.61. The property owner did not show up to defend her reasoning for her appeal.

She called and then he went to the house and gave the information about the hearing/meeting to the daughter.

Dr. Jasser made the motion to uphold the green pool assessment. Shannon, Smith seconded the motion. The motion passed unanimously.

**Discussion Items**

1. **Public Health Report**

Thank you for hearing our presentation on community health assessment. We are a huge community and we have historically lacked flexible funding. The process of going through it helps get buy in from people and makes them aware that they are part of the entire solution. It is our first step and you will hear more about it as we go along.

I want to extend a warm welcome to Ms. Colleen Wheeler and Debra Baldauff. I would like to offer the new members a Public Health 101 informational. I will invite the other three so that everyone is in the loop.

**Policy work/Community transformation division** –An email from me to all of our staff was sent out regarding our successes in tobacco related policy work. Years back we sacrificed a number of positions in our tobacco program and the payoff is sort of outlined in the email that I sent to the staff. The financial benefit that the county will accrue because of the Maricopa Community Colleges' new policy on tobacco is nearly 300 million dollars in savings of public expense for health care.

We were successful in getting a significant increase in our SNAPed program (food stamp grant) We received guidance for how we can use this next year. You will hear more about this later. Mr. Spicker said that he would like to connect with him regarding the End Hunger program.

We are trying to do more return on investment on calculations in terms of what to pay or what to fund so that you can make better decisions down the road.

I am going to try to produce a quarterly report that highlights a couple of programs that will coincide with board of health meetings.

We are taking a big hit in FTF funding in Child Health care consultation funding. We lost 68%. We also increased a few positions in our Nurse Family Partnership. Most of these cuts and RIFs are due to the flux that has been happening in public health funding.

Decreases in eligibility for ACCCHS, as you might predict hit healthcare for the homeless pretty hard. Our ACCCHS revenues look like they have declined. That half million dollar loss revenue we are in the process of trying to figure how to absorb.

A press release has been sent out regarding the Ryan White planning council to cut non medical support services. They have had to terminate the food box program which is a support service in efforts to continue core services for that population. My opinion is that they did what they had to do. They protected the core function of that program.

In addition, there will be a press release out tomorrow announcing our first death from West Nile this year. There have been nine caused heat deaths so far, six heat associated and 53 more under investigation. Are these tracked in home or homeless? The medical examiner determines this and we do basic epidemiology and it changes from year to year. We had a big year with a lot of homeless individuals a few years back. This data drove policy decisions with cooling stations, water distribution stations that have helped. We still lose some homeless individuals to heat but not as many.

There is new law regarding booster seats that has gone into effect. We are helping to spread the word as well as using our partners to hand out a limited supply to hand out free booster seats.

Our new county manager is Tom Manos, I had my first meeting with him not too long ago and I am very impressed and I think it will be an opportunity for us to get our message out to the board of supervisors. One of his first steps was to reorganize some departments. We have for two years been under Joy Rich, but we are back under Sandi Wilson.

#### **Adjournment**

Mr. Spicker motioned to adjourn the meeting. Ms. Smith seconded the motion. The motion passed unanimously. The meeting was adjourned at 4:55 pm.